

F150000000639

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

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STATE
ATLANTA, FLORIDA

MD 2/17



111 N. Railroad St.
P.O. Box 390
Groesbeck, TX 76642
tel: 254.729.8002
FAX: 254.729.8007

February 5, 2015

Region Code 1644

Florida Secretary of State
Division of Corporations
Corporate Filings
2661 Executive Center Circle
462198656, 462198656 32301

Ref: Application for Certificate of Authority

Dear Sir/Madam:

We are filing the following documents on behalf of **SG Program Insurance Agency Retail, Inc.**

The items checked below are enclosed.

- ☒ Application for Certificate of Authority
- ☒ Check #19828 Amount \$ 70.00
- ☒ Certificate of Good Standing

Should you need anything further, please do not hesitate to contact me.

Please return all filed documents to my attention.

Sincerely,

Ashley Herring

Ashley Herring
Licensing and Compliance Specialist
111 N. Railroad
P.O. Box 390
Groesbeck, TX 76642
Ph: 254*729*6179
Fax: 254*729*8069
Email: aherring@ilsainc.com

COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: SG Program Insurance Agency Retail, Inc.

Name of corporation - must include suffix

Dear Sir or Madam:

The enclosed Application by Foreign Corporation for Authorization to Transact Business in Florida, Certificate of Existence, or Certificate of Good Standing and check are submitted to register the above referenced foreign corporation to transact business in Florida.

Please return all correspondence concerning this matter to the following:

Ashley Herring

Name of Person

ILSA, Inc.

Firm/Company

111 N Railroad

Address

Groesbeck, TX 76642

City/State and Zip code

david@solg.net

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Ashley Herring

Name of Person

at (254) 729-6179

Area Code & Daytime Telephone Number

STREET/COURIER ADDRESS:

New Filing Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

MAILING ADDRESS:

New Filing Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Enclosed is a check for the following amount:

☒ \$70.00 Filing Fee

☐ \$78.75 Filing Fee &
Certificate of Status

☐ \$78.75 Filing Fee &
Certified Copy

☐ \$87.50 Filing Fee,
Certificate of Status &
Certified Copy

**APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT
BUSINESS IN FLORIDA**

*IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO
REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.*

15 FEB 11 PM 12:28
STATE OF FLORIDA
DEPARTMENT OF STATE

1. **SG Program Insurance Agency Retail, Inc.**

(Enter name of corporation; must include INCORPORATED, COMPANY, CORPORATION,
"Inc.," "Co.," "Corp.," "Inc.," "Co." or "Corp.")

(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

2. **TX** 3. **462198656**
(State or country under the law of which it is incorporated) (FBI number, if applicable)

4. **02/26/2013** 5. **Perpetual**
(Date of incorporation) (Duration: Year corp. will cease to exist or perpetual)

6. **when filed**
(Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. **2211 Nw Military Hwy. Suite 211, San Antonio, TX 78213**
(Principal office address)

2211 Nw Military Hwy. Suite 211, San Antonio, TX 78213
(Current mailing address)

8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: **Corporate Creations Network Inc.**

Office Address: **11380 Prosperity Farms Road #221E**

Palm Beach Gardens, Florida **33410**
(City) (Zip code)

9. Registered agent's acceptance:

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.



(Registered agent's signature)

Diana Serra, Vice President

10. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

11. Names and business addresses of officers and/or directors:

A. DIRECTORS

Chairman: None

Address: _____

Vice Chairman: None

Address: _____

Director: None

Address: _____

Director: None

Address: _____

B. OFFICERS

President: David Dickie

Address: 2211 Nw Military Hwy. Suite 211, San Antonio, TX 78213

Vice President: _____

Address: _____

Secretary: _____

Address: _____

Treasurer: _____

Address: _____

NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

12. _____

Signature of Director or Officer

The officer or director signing this document (and who is listed in number 12 above) affirms that the facts stated herein are true and that he or she is aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

13. David Dickie - President

(Typed or printed name and capacity of person signing application)

Corporations Section
P.O.Box 13697
Austin, Texas 78711-3697



Coby Shorter, III
Deputy Secretary of State

Office of the Secretary of State

Certificate of Fact

The undersigned, as Secretary of State of Texas, does hereby certify that the document, Certificate of Formation for SG Program Insurance Agency Retail, Inc. (file number 801740457), a Domestic For-Profit Corporation, was filed in this office on February 26, 2013.

It is further certified that the entity status in Texas is in existence.

In testimony whereof, I have hereunto signed my name officially and caused to be impressed hereon the Seal of State at my office in Austin, Texas on January 29, 2015.



A handwritten signature in cursive script that reads "Coby Shorter III".

Coby Shorter, III
Deputy Secretary of State